

QUARTERLY STATEMENT

AS OF JUNE 30, 2013

OF THE CONDITION AND AFFAIRS OF THE COVENTRY Cares of Michigan, Inc.

NAIC Group Code NAIC Company Code 12193 Employer's ID Number 20-1052897 Michigan Organized under the Laws of State of Domicile or Port of Entry Country of Domicile **United States** Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity [] Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization [X] Other [] Is HMO, Federally Qualified? Yes [] No [X] Incorporated/Organized 04/22/2004 Commenced Business 10/01/2004 Statutory Home Office 1333 Gratiot, Ste 400 Detroit, MI, US 48207 (City or Town, State, Country and Zip Code) 1333 Gratiot, Ste 400 Main Administrative Office Detroit, MI, US 48207 313-465-1519 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) 1333 Gratiot, Ste 400 Detroit, MI, US 48207 Mail Address Town, State, Country and Zip Primary Location of Books and Records 1333 Gratiot, Ste 400 Detroit, MI, US 48207 313-465-1519 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number (Street and Number) www.CoventryCaresMI.com Internet Web Site Address Statutory Statement Contact Kenyata J. Rogers 313-465-1519 (Area Code) (Telephone Number) (Extension) 313-465-1604 KJRogers@cvty.com (FAX Number) **OFFICERS** Title Name Title Name President and Chief Executive Beverly Ann Allen Officer Kenyata Jamilea Rogers Chief Financial Officer John Joseph Ruhlmann Corporate Controller Elaine R. Cofrancesco # Vice President & Treasurer OTHER OFFICERS Kevin J. Casey # Senior Investment Officer Shirley R. Smith **DIRECTORS OR TRUSTEES** Claudia Bierre Beverly Ann Allen Michael J. Burgoyne Pamela S. Sedmak # Ernestine Romero Harvey Turner State of ...Michigan. County of ...Wayne The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement. Beverly Ann Allen Kenyata Jamilea Rogers John Joseph Ruhlmann President and Chief Executive Officer Chief Financial Officer Corporate Controller Yes [X] No [] a. Is this an original filing? b. If no: Subscribed and sworn to before me this 1. State the amendment number day of 2. Date filed 3. Number of pages attached

Rochell D. Jenkins, Notary Public December 25, 2018

ASSETS

		<u> </u>			
			Current Statement Date	9	4
		1	2	3	
				Not Advited Avenue	December 31
		Assets	Nonadmitted Assets	Net Admitted Assets	Prior Year Net Admitted Assets
				(Cols. 1 - 2)	
1.	Bonds	11,231,134		11,231,134	18,504,637
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	İ		_ 1	0
_					0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
1	Real estate:				
٦.					
	4.1 Properties occupied by the company (less				
	\$encumbrances)			0	0
	4.2 Properties held for the production of income				
	·			٥	(
	(less \$ encumbrances)			^U	(
	4.3 Properties held for sale (less				
	\$encumbrances)			0	(
5	Cash (\$18,416,553),				
٥.					
	cash equivalents (\$8,432,079)				
	and short-term investments (\$1,273)	26,849,905		26,849,905	24 , 141 , 267
6.	Contract loans (including \$premium notes)				
	Derivatives			_	
		i			
8.	Other invested assets	J0		0	(
9.	Receivables for securities			0	(
10	Securities lending reinvested collateral assets				(
	Aggregate write-ins for invested assets				(
12.	Subtotals, cash and invested assets (Lines 1 to 11)	38,081,039	J	38,081,039	42,645,904
13.	Title plants less \$				
	only)			٥	(
14.	Investment income due and accrued	145,037		145,037	228,914
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection			0	(
				0	
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)			0	(
	15.3 Accrued retrospective premiums			U	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	(
	16.2 Funds held by or deposited with reinsured companies	İ		0	(
	16.3 Other amounts receivable under reinsurance contracts	i		0	
17.	Amounts receivable relating to uninsured plans			0	
18.1	Current federal and foreign income tax recoverable and interest thereon			0	(
	2 Net deferred tax asset				324 , 153
19.	Guaranty funds receivable or on deposit			ļ0	
20.	Electronic data processing equipment and software			0	
	Furniture and equipment, including health care delivery assets				
-1.	(\$)	22 726	22 726	^	
	Net adjustment in assets and liabilities due to foreign exchange rates			0	(
23.	Receivables from parent, subsidiaries and affiliates		ļ	0	(
	Health care (\$1,225,482) and other amounts receivable				1.340 847
	Aggregate write-ins for other than invested assets				
		ZJU,400			
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	40,082,865	260,194	39,822,671	46,712,097
27	From Separate Accounts, Segregated Accounts and Protected				
				0	,
	Cell Accounts		200 101		40.740.00
28.	Total (Lines 26 and 27)	40,082,865	260,194	39,822,671	46,712,097
	DETAILS OF WRITE-INS				
1101				n	(
		İ			٠٠
1102.				ļ ⁰	(
1103.			ļ	0	(
1198	Summary of remaining write-ins for Line 11 from overflow page	Λ	0	n l	(
		0		0	
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	· · · · · · · · ·		-	(
2501.	Tax Refund Receivable			0	2 , 172 , 279
	Prepaid Expenses			0	(
	Vehicles		i '	0	
		i	· · · · · · · · · · · · · · · · · · ·		
2598.	Summary of remaining write-ins for Line 25 from overflow page			0	(
		236,468	236,468	0	2,172,279

${\bf STATEMENT\ AS\ OF\ JUNE\ 30,\ 2013\ OF\ THE\ Coventry Cares\ of\ Michigan,\ Inc.}$

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAP		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
	Claims unpaid (less \$ reinsurance ceded)				
	Accrued medical incentive pool and bonus amounts				781,306 148,082
l	Unpaid claims adjustment expenses	149,301		149,301	140 ,002
i	Aggregate health policy reserves including the liability of \$for medical loss ratio rebate per the Public Health				
i	Service Act.			0	0
i	Aggregate life policy reserves	i			0
	Property/casualty unearned premium reserve				0
	Aggregate health claim reserves				0
	Premiums received in advance				
1	General expenses due or accrued				1,261,860
	Current federal and foreign income tax payable and interest thereon (including	, ,		, ,	
	\$	133,635		133,635	580,016
	Net deferred tax liability				
	Ceded reinsurance premiums payable				
	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated			0	0
l	Borrowed money (including \$ current) and				
i	interest thereon \$ (including				
	\$ current)				
15.	Amounts due to parent, subsidiaries and affiliates	144,415		144 , 415	174,748
16.	Derivatives.			0	0
1	Payable for securities				0
18.	Payable for securities lending			0	0
19. F	Funds held under reinsurance treaties (with \$				
6	authorized reinsurers, \$ unauthorized reinsurers				
i	and \$ certified reinsurers)			0	0
I	Reinsurance in unauthorized and certified (\$)				
1	companies				0
	Net adjustments in assets and liabilities due to foreign exchange rates				0
l	Liability for amounts held under uninsured plans			0	0
	Aggregate write-ins for other liabilities (including \$				
	current)				
	Total liabilities (Lines 1 to 23)				
	Aggregate write-ins for special surplus funds				
	Common capital stock				
	Preferred capital stock		XXX		0
	Surplus notes				
29. 3 30. <i>i</i>	Aggregate write-ins for other than special surplus funds		~~~	0	0
31.	Unassigned funds (surplus)			3 081 328	
l	Less treasury stock, at cost:				1 ,002 ,440
i	32.1shares common (value included in Line 26				
\$	`	YYY	xxx		0
i .	32.2shares preferred (value included in Line 27				
\$		XXX	XXX		0
	Total capital and surplus (Lines 25 to 31 minus Line 32)		XXX		
I	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	39,822,671	46,712,097
				,.	-, ,
1	DETAILS OF WRITE-INS			_	^
l					0
2302					0
2303					0
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
	· · · · · · · · · · · · · · · · · · ·	XXX	XXX		0
2502					
i				i	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. ·	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001		xxx	xxx		0
i					
					0
			İ		
	Summary of remaining write-ins for Line 30 from overflow page		XXX		0
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENU		<u> </u>		
		Current Ye	ear To Date	Prior Year To Date	Prior Year Ended December 31
		1 Unanyored	2 Total	3 Total	4 Total
1	Member Months	Uncovered XXX	Total 245 441	Total274,417	Total 535 706
l	Net premium income (including \$ non-health premium income)	1	i	i	
3.	Change in unearned premium reserves and reserve for rate credits	1			
4.	Fee-for-service (net of \$medical expenses)				
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX		88, 187, 205	173 , 169 , 465
1 -	al and Medical:				
i	Hospital/medical benefits	ı	i	i	
	Other professional services	1		I	
11.	Outside referrals				
12.	Emergency room and out-of-area	1	1		
13.	Prescription drugs	1	1	1	
14.	Incentive pool, withhold adjustments and bonus amounts				
15.	Subtotal (Lines 9 to 15)	1	i	i	
Less:	Net reinsurance recoveries		9 546	60 279	156 /20
18.	Total hospital and medical (Lines 16 minus 17)	1	1	1	
19.	Non-health claims (net)	1	i	i	
20.	Claims adjustment expenses, including \$cost containment		1	870,793	
21.	expenses	i	6,493,058	9,981,003	14,682,410
22.	Increase in reserves for life and accident and health contracts (including				
	\$ increase in reserves for life only)				
1	Total underwriting deductions (Lines 18 through 22)	1	i	i	
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned	1		1	
26.	Net realized capital gains (losses) less capital gains tax of \$135,643			, ,	
27.	Net investment gains (losses) (Lines 25 plus 26)	0	511,490	567,713	1,081,684
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered				0
	\$			0	0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	xxx	3,328,807	3,636,561	9 ,655 ,380
31.	Federal and foreign income taxes incurred	xxx	786,093	1 , 156 , 746	2,532,568
32.	Net income (loss) (Lines 30 minus 31)	XXX	2,542,714	2,479,815	7,122,812
	DETAILS OF WRITE-INS				
0601.		XXX	45.740	0	0
0602.		XXX	45,718	52,218	110,430
0603.	0	XXX			
0698.	.,		0 0	52,218	110 120
0699. 0701.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	45,718	J2,210	110,430
0701.		XXX		0	0
0702.		i	i	n	n
i	Summary of remaining write-ins for Line 7 from overflow page			0	0
0799.		XXX	0	0	0
1401.	(0	0
1402.				0	0
1403.				0	0
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.				0	0
2902.				0	0
2903.		1	ļ	0	0
2998.	Summary of remaining write-ins for Line 29 from overflow page		0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND	EXPENSES (Continue	d) 3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	24,253,445	25,885,250	25,885,250
34.	Net income or (loss) from Line 32	2,542,714	2,479,815	7 , 122 , 812
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax	0	0	(228,740)
39.	Change in nonadmitted assets	(113,831)	(68,493)	(38,964)
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock		0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		13,087	13,087
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in		0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders	(7,000,000)	(8,500,000)	(8,500,000)
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	(4,571,117)	(6,075,591)	(1,631,805)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	19,682,328	19,809,659	24,253,445
	DETAILS OF WRITE-INS			
4701.			0	0
4702.			0	0
4703.			0	0
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

409,622 104,582 82,865,628	Prior Year To Date 88,149,414529,645 52,371	Prior Year Ended December 31
	88 , 149 , 414 529 , 645	172,858,17
409,622 104,582 82,865,628	529,645	
409,622 104,582 82,865,628	529,645	
104,582 82,865,628		
82,865,628	52 371 I	935 , 7
		(1,108,9
	88,731,430	172,684,9
74 , 125 , 205	73,000,094	148,873,9
	0	
7 ,288 ,519	10,695,982	16,300,1
	0	
1,368,113	1,474,080	2,663,6
82,781,837	85,170,156	167,837,7
83,791	3,561,274	4,847,2
10,351,245	8,778,662	15, 191, 2
		, ,
	0	
	0	
0	0	
10.351.245	8.778.662	15 , 191 , .
2.756.354	4.774.253	10.094.0
	, ,	
0		
0		
2 756 354		10,094,
	, ,	,
	•	5,096,
7,004,001	3,143,021	3,030,
0	٥	
		8,500,
		(2,107,
2,023,331	20,004	(2,107,
(4 970 043)	(8 474 416)	(10,607,
(1,310,010)	(=,,)	(.0,001,
2 708 630	(1 169 615)	(663
2,100,000		(000,
24 141 266	24 804 498	24,804,4
		24,141,
	1,368,113 82,781,837 83,791 10,351,245	

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STATEMENT AS OF JUNE 30, 2013 OF THE CoventryCares of Michigan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &	ensive Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3	Medicare	Vision Onlv	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:	Total	individual	Group	Supplement	Only	Offily	Health Benefit Plan	Medicare	Medicald	Other
1. Prior Year	42,831	619	0	0	0	0	0	0	42,212	
2. First Quarter	41,142	611	0	0	0	0	0	0	40,531	
3. Second Quarter		662	0	0	0	0	0	0	39,310	
4. Third Quarter										
5. Current Year	0									
6. Current Year Member Months	245,440	3,787							241,653	
Total Member Ambulatory Encounters for Period:										
7. Physician	186,247	1,390							184,857	
8. Non-Physician	30,566	112							30,454	
9. Total	216,813	1,502	0	0	0	0	0	0	215,311	(
10. Hospital Patient Days Incurred	13,582	12							13,570	
11. Number of Inpatient Admissions	2,871	4							2,867	
12. Health Premiums Written (a)		302,581							82,309,581	
13. Life Premiums Direct										
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned		302,581							82,309,581	
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services		144,399							73,998,891	
18. Amount Incurred for Provision of Health Care Services	72,315,252	136,458							72,178,794	

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims									
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total			
Claims unpaid (Reported)			·		•	0			
0199999 Individually listed claims unpaid	0]0	0	0	0	0			
0299999 Aggregate accounts not individually listed-uncovered	4,466,054	614,418	408,444	174,250	79,259	5,742,425			
0499999 Subtotals	4,466,054	614,418	408,444	174,250	79,259	5,742,425			
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	12,017,661			
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX				
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	17,760,086			
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	537,259			

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

ANALTSIS OF CLAIMS UNPAIL	Clai		oility			
	Paid Yea	r to Date	End of Curre	ent Quarter	5	6
	1	2	3	4		
			_			Estimated Claim
	On	_	On	_		Reserve and Claim
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred	Liability
Line of Business	to January 1 of Current Year	Claims Incurred	Dec. 31 of Prior Year	Claims Incurred	in Prior Years (Columns 1 + 3)	Dec. 31 of Prior Year
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)	15,539	125 , 100	550	23 , 128	16,089	31,619
Medicare Supplement					0	0
Medicare Supplement					U	μ
3. Dental only					0	0
4. Vision only					0	0
4. Vision only						
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare					0	<u></u>
6. The Avii include						
7. Title XIX - Medicaid	14,892,681	58,373,064	1,078,131	16,658,277	15,970,812	19,312,459
8. Other health					0	0
S. Otto House						
Health subtotal (Lines 1 to 8)	14,908,220	58,498,164	1,078,681	16,681,405	15,986,901	19,344,078
10. Health care receivables (a)					0	n
19. House due reconsules (u)						
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts	441.648	286,714	0	537 . 259	441.648	781.306
12. Modelan Modelan pools and boiled amounts		200,714		, 200		
13. Totals (Lines 9-10+11+12)	15,349,868	58,784,878	1,078,681	17,218,664	16,428,549	20,125,384

⁽a) Excludes \$ loans or advances to providers not yet expensed.

1. Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of CoventryCares of Michigan ("the Company") have been prepared in accordance with the accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services (DIFS). Such practices differ in certain respects from generally accepted accounting principles in determining financial position and results of operations. Certain assets designated as non-admitted (e.g. receivables greater than 90 days old, prepaid assets, certain amounts of property and equipment, notes receivable and deferred taxes) are excluded from the balance sheet by a direct charge to surplus. Bonds generally are stated at amortized cost, except for bonds that are rated by the NAIC as class 3-6 which are reported at the lower of amortized cost or fair market value.

DIFS recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under Michigan insurance laws. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Michigan. The State of Michigan has adopted prescribed accounting practices that differ from those found in NAIC SAP, in that provider advances are not allowed, and thus, must be non-admitted. The Company, however, did not have any amounts due from providers for advances for the period ended June 30, 2013 and December 31, 2012.

Below is a reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by DIFS as of June 30, 2013 and December 31, 2012:

	State of Domicile	<u>2013</u>	<u>2012</u>
NET INCOME (1) Company state basis (Page 4, Line 32, Columns 2 & 3)	MI	\$2,542,714	\$7,122,812
(4) NAIC SAP (1-2-3=4)	MI	\$2,542,714	\$7,122,812
SURPLUS (5) Company state basis (Page 3, Line 33, Columns 3 & 4)	MI	\$19,682,328	\$24,253,445
(8) NAIC SAP (5-6-7=8)	MI	\$19,682,328	\$24,253,445

- B. Use of Estimates in the Preparation of the Financial Statements NO CHANGE
- C. Accounting Policy NO CHANGE
- Accounting Changes and Corrections of Errors NO CHANGE
- 3. Business Combinations and Goodwill
 - A. Statutory Purchased Method NONE
 - B. Statutory Merger Method

NONE

C. Assumption Reinsurance

NONE

D. Impairment Losses

NONE

- Discontinued Operations NONE
- 5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans NONE

- B. Debt Restructuring NONE
- C. Reverse Mortgages NONE
- D. Loan-Backed Securities
 - 1. Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
 - 2. The Company had no recognized OTTI on loan backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date June 30, 2013.
 - 3. The Company had no recognized OTTI on loan backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date June 30, 2013.
 - 4. The company had no unrealized loss position on loan-backed and structured securities held by the Company at June 30, 2013.
 - 5. None.
- E. Repurchase Agreements and/or Securities Lending Transactions NONE
- F. Real Estate NONE
- G. Investments in low-income housing credits NONE
- Joint Ventures, Partnerships and Limited Liability Companies NONE
- 7. Investment Income NO CHANGE
- 8. Derivative Instruments NONE
- Income Taxes NO CHANGE
- 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
 - A. Amounts due to Coventry Health Care, Inc. as of June 30, 2013 and December 31, 2012 are \$144,415 and \$174,748 respectively.

The terms of settlement require that these amounts are settled within 30 days.

B. On August 19, 2012, the Company's parent, Coventry Health Care, Inc. ("Coventry"), Aetna Inc. ("Aetna") and Jaguar Merger Subsidiary, Inc. ("Merger Sub") entered into an Agreement and Plan of Merger (as amended, and as may be further amended), pursuant to which, subject to the satisfaction or waiver of certain conditions, Merger Sub will be merged with and into Coventry, with Coventry surviving the merger as a wholly-owned subsidiary of Aetna (the "Merger").

The consummation of the Merger was subject to customary closing conditions, including, among others, the adoption of the Merger Agreement by Coventry's stockholders, the absence of certain legal impediments to the consummation of the Merger, the receipt of specified governmental consents and approvals, the early termination or expiration of the waiting period under the Hart-Scott-Rodino Antitrust Improvement Act of 1976, and, subject to certain exceptions, the accuracy of representations and warranties made by the Coventry and Aetna, respectively, and compliance by the Coventry and Aetna with their respective obligations under the Merger Agreement. The Merger closed on May 7, 2013.

C. The company paid a \$7.0 million ordinary cash dividend to Coventry on June 24, 2013. On June 8, 2012, the company paid a \$8.5 million cash dividend to Coventry of which, \$4.5 million was ordinary and \$4.0 million was extraordinary.

11. Debt

NONE

- 12. Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Post-retirement Benefit Plans.
 - A. The Company does not sponsor a Defined Benefit Plan.
- Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations NO CHANGE
- 14. Contingencies NO CHANGE
- 15. Leases

NO CHANGE

- Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk NONE
- 17. Sale, Transfers and Servicing of Financial Assets and Extinguishment of Liabilities NONE
- Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans NONE
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

NONE

- 20. Fair Value Measurements
 - A. NONE
 - B. NONE

C.

Type of Financial Instrument	 Aggregate Fair Value	Admitted Assets	(Level 1)	-	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds, Short term, and cash equivalent	\$ 19,628,537	\$ 19,664,486 \$	1,050,452	\$	18,578,085	\$	\$ 19,628,537

- 21. Other Items
 - A.-F. NO CHANGE
- 22. Events Subsequent

NONE

23. Reinsurance

NO CHANGE

24. Respectively Rated Contracts and Contracts Subject to Redetermination.

NO CHANGE

25. Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2012 were \$20,273,466. As of June 30, 2013, \$15,488,472 has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior year are now \$1,088,159 as a result of re-estimation of unpaid losses and loss adjustment expenses. Therefore, there has been \$3,696,835 favorable prior year development since December 31, 2012. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. There are no retrospectively rated contracts subject to redetermination. However, the business to which it relates is subject to premium adjustments.

26. Intercompany Pooling Arrangements

NONE

27. Structured Settlements

NONE

- 28. Health Care Receivables
 - A. Pharmaceutical Rebates Receivables NONF
 - B. Risk Sharing Receivables NONE
- 29. Participating Policies

NONE

30. Premium Deficiency Reserves

NO CHANGE

31. Anticipated Salvage and Subrogation

NO CHANGE

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Did the reporting entity Domicile, as required	tate of		Yes []	No [X]				
1.2			y state?					Yes []	No []
2.1			s statement in the charter, by-laws, articles					Yes []	No [X]
2.2	If yes, date of change	:								
3.1	Have there been any	substantial changes in the o	rganizational chart since the prior quarter e	end?				Yes [X	(]	No []
3.2	•	is yes, provide a brief descri oventry HealthCare, Inc	ption of those changes.							
4.1	Has the reporting entit	ty been a party to a merger o	or consolidation during the period covered	by this statement?				Yes []	No [X]
4.2		ne of entity, NAIC Company esult of the merger or consol	Code, and state of domicile (use two letter idation.	r state abbreviation)	or any entity th	at has				
			1 Name of Entity	2 NAIC Company Cod	de State of					
			,	,						
6.1	fact, or similar agreen If yes, attach an expla	nent, have there been any si nation.	agreement, including third-party administra gnificant changes regarding the terms of th ion of the reporting entity was made or is b	ne agreement or prin	cipals involved	?	Yes []	·		NA []
6.2			ion of the reporting entity was made or is to nation report became available from either	_				'	12/3	1/2009
0.0			ince sheet and not the date the report was	•				1	12/3	1/2009
6.3	or the reporting entity.	This is the release date or o	ion report became available to other states completion date of the examination report a	and not the date of th	e examination	(balance		C	9/3	0/2010
6.4	By what department o	·								
	·		S							
6.5			e latest financial examination report been a				Yes []	No []	NA [X]
6.6	Have all of the recomm	mendations within the latest	financial examination report been complied	d with?			Yes [X]	No []	NA []
7.1	Has this reporting enti suspended or revoked	ty had any Certificates of Au by any governmental entity	thority, licenses or registrations (including during the reporting period?	corporate registratio	n, if applicable)		Yes []	No [X]
7.2	If yes, give full informa	ation:								
8.1	Is the company a subs	sidiary of a bank holding con	npany regulated by the Federal Reserve B	oard?				Yes []	No [X]
8.2	If response to 8.1 is ye	es, please identify the name	of the bank holding company.							
8.3	Is the company affiliat	ed with one or more banks,	thrifts or securities firms?					Yes [1	No [X]
8.4	If response to 8.3 is ye federal regulatory serv	es, please provide below the vices agency [i.e. the Federa	names and location (city and state of the Il Reserve Board (FRB), the Office of the Courities Exchange Commission (SEC)] and	main office) of any a Comptroller of the Cu	filiates regulatorrency (OCC),	ed by a the Federal		٠	-	. ,
		1	2	3	4	5	6			
	Affili	iate Name	Location (City, State)	FRB	occ	FDIC	SEC			

GENERAL INTERROGATORIES

9.1	similar functions) of the reporting entity subject to a code of ethics, which includes					Yes [X]	No []	
	(a) Honest and ethical conduct, including the ethical handling of actual or appare	nt conflic	ts of interest between pers	sonal and	professional relationship	s;		
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic repor							
	(c) Compliance with applicable governmental laws, rules and regulations;							
	(d) The prompt internal reporting of violations to an appropriate person or person	s identifie	ed in the code; and					
	(e) Accountability for adherence to the code.							
9.11	If the response to 9.1 is No, please explain:							
9.2	Has the code of ethics for senior managers been amended?					Yes []	No [X]	
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).							
9.3	Have any provisions of the code of ethics been waived for any of the specified offi					Yes []	No [X]	
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).							
		ANCI						
10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?								
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amoun				\$			
	INVE							
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, plac for use by another person? (Exclude securities under securities lending agreement for use by another person?)					Yes []	No [X]	
11.2	If yes, give full and complete information relating thereto:							
12.	Amount of real estate and mortgages held in other invested assets in Schedule B.							
13.	Amount of real estate and mortgages held in short-term investments:				\$			
14.1	Does the reporting entity have any investments in parent, subsidiaries and affilia	tes?				Yes []	No [X]	
14.2	If yes, please complete the following:							
			1 Prior Year-End Book/Adjusted Carrying Value		2 Current Quarter Book/Adjusted Carrying Value			
	14.21 Bonds							
	14.23 Common Stock							
	14.24 Short-Term Investments			\$				
	14.25 Mortgage Loans on Real Estate							
	14.27 Total Investment in Parent, Subsidiaries and Affiliates	•		•				
	(Subtotal Lines 14.21 to 14.26)	\$	0	\$	0			
	above	\$		\$				
15.1	Has the reporting entity entered into any hedging transactions reported on Schedu	ule DB? .				Yes []	No [X]	
15.2	If you has a comprehensive description of the hedging program been made available	able to th	o domiciliary state?			Voc []	No []	

If no, attach a description with this statement.

GENERAL INTERROGATORIES

16	For the reporting entity's security lending progr 16.1 Total fair value of reinvested collateral 16.2 Total book adjusted/carrying value of re 16.3 Total payable for securities lending rep	\$ \$				
17.	Excluding items in Schedule E – Part 3 – Spec entity's offices, vaults or safety deposit boxes, pursuant to a custodial agreement with a qualif Considerations, F. Outsourcing of Critical Func	were all stocks, bonds ied bank or trust com tions, Custodial or Sa	s and other securities, ow pany in accordance with afekeeping Agreements of	med throughout the current year held Section 1, III – General Examination f the NAIC <i>Financial Condition Examine</i>	ers	√o []
17.1	For all agreements that comply with the require	ments of the NAIC Fi	inancial Condition Exami	ners Handbook, complete the following:		
	Name State Street Bank and	1 of Custodian(s) Trust Company	225 Frankl	2 Custodian Address n Street, Boston, MA 02110		
17.2	For all agreements that do not comply with the location and a complete explanation:	requirements of the N	NAIC Financial Condition	Examiners Handbook, provide the nam	ne,	
	1 Name(s)		2 Location(s)	3 Complete Explanation(s)		
17.3	Have there been any changes, including name	changes, in the custo	odian(s) identified in 17.1	during the current quarter?	Yes [X] N	10 []
17.4	If yes, give full and complete information relating	g thereto:				
	1 Old Custodian	2 New Custodi		nge Reason		
	Citibank, N.A	State Street Bank Trust	and05/07/20	13Aetna Purchase of Company		
17.5	Identify all investment advisors, broker/dealers accounts, handle securities and have authority					
	1 Central Registrat	on Depository	2 Name(s)	3 Address		
	N/A					
	Have all the filing requirements of the <i>Purpose</i> If no, list exceptions:	s and Procedures Ma	nual of the NAIC Securiti	es Valuation Office been followed?	Yes [X]	No []

GENERAL INTERROGATORIES

PART 2 - HEALTH

1	. Operating Percentages:		
	1.1 A&H loss percent	_	87.8 %
	1.2 A&H cost containment percent	_	0.0 %
	1.3 A&H expense percent excluding cost containment expenses	_	9.0 %
2	.1 Do you act as a custodian for health savings accounts?	_	Yes [] No [X]
2	.2 If yes, please provide the amount of custodial funds held as of the reporting date	\$	
2	.3 Do you act as an administrator for health savings accounts?		Yes [] No [X]
2	.4 If yes, please provide the balance of the funds administered as of the reporting date	\$	

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 2 3 NAIC Federal Effective Company Code ID Number Date		Effective	4	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Is Insurer Authorized? (Yes or No)	
Company Code	ID Number	Date	Name of Reinsurer	Jurisdiction	Ceded	(Yes or No)	
					·····		
	ļ						
			NONE				
			NUNE				
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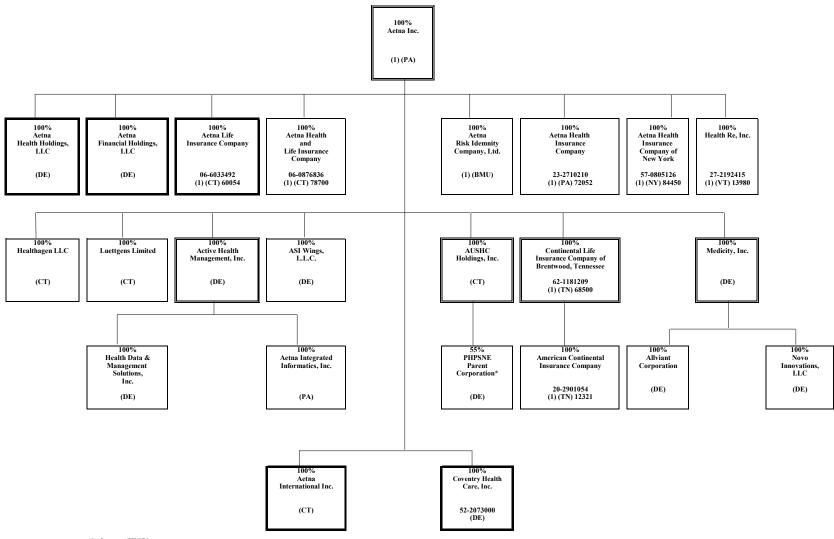
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

			1	Current Year to Date - Allocated by States and Territories Direct Business Only									
			·	2	3	4	5 Federal Employees	6	7	8	9		
	States, Etc.		Active Status	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Health Benefits Program Premiums	Life & Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts		
i	Alabama		N							0			
i	Alaska		NN							10			
	Arkansas		NN.							0			
1	California		N							0			
i	Colorado		N					<u> </u>		ļ0			
1	Connecticut		N							ļ0			
	Delaware Dist. Columbia		NN							1			
	Florida		N							0			
	Georgia		N							ļ0			
i	Hawaii		N							ļ0			
1	Idaho		N					<u> </u>		0			
1	IllinoisIndiana		N							J0			
i	lowa		N							1 0			
i	Kansas		N							0			
18.	Kentucky	KY	N					ļ	ļ	ļ0			
	Louisiana		N		.			ļ	 	J0			
i	Maine		NN			l		 	l	ļ0			
1	Maryland		NN							1n			
1	Michigan		L			82,309,581				82,612,162			
	Minnesota		N	,						0			
1	Mississippi		N							ļ0			
	Missouri		N					<u> </u>		0			
	Montana Nebraska		NN					l	l	10			
	Nevada		NN.							1 0			
1	New Hampshire		N							0			
31.	New Jersey	NJ	N							ļ0			
i	New Mexico		N							ļ0			
	New York		N							ļ0			
i .	North Carolina North Dakota	NC ND	N							l			
ı	Ohio		N							0			
i	Oklahoma		N							0			
1	Oregon		N							J0			
1	Pennsylvania		N						<u> </u>	0			
i	Rhode IslandSouth Carolina		NN]0 n			
1	South Dakota		NN							T 0			
i	Tennessee		N							0			
44.	Texas	TX	N							0			
1	Utah	UT	N							0			
1	Vermont		N							ļ0			
1	Virginia Washington		NN						L	j			
1	West Virginia		N							0			
1	Wisconsin		N					ļ	ļ	0			
1	Wyoming		N			<u> </u>			<u> </u>	ļ0			
i	American Samoa		NNN					 	l	ļ			
1	Guam Puerto Rico		N		L			<u> </u>		<u> </u>			
1	U.S. Virgin Islands		N							0			
56.	Northern Mariana Islands	MP	N			ļ		ļ	ļ	ļ0			
	Canada		N			ļ		ļ	ļ	0	ļ		
	Aggregate other alien		XXX	202 591	0 0	0	0	0	0	00.040.400	ļ0		
i	SubtotalReporting entity contribution Employee Benefit Plans	ns for	XXXXXX	302,581	U	82,309,581	0	0	0	82,612,162 0	JU		
61.	Total (Direct Business)		(a) 1	302,581	0	82,309,581	0	0	0	82,612,162	0		
58001	DETAILS OF WRITE-INS		XXX										
58002				-				<u> </u>			<u> </u>		
58003			ХХХ								 		
	Summary of remaining write	e-ins for	XXX										
	Line 58 from overflow page Totals (Lines 58001 through		XXX	0	0	0	0	0	0	0	0		
	plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0		

⁽L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1- ORGANIZATIONAL CHART



⁽¹⁾ Insurers/HMO's

(1) Insuresymptots

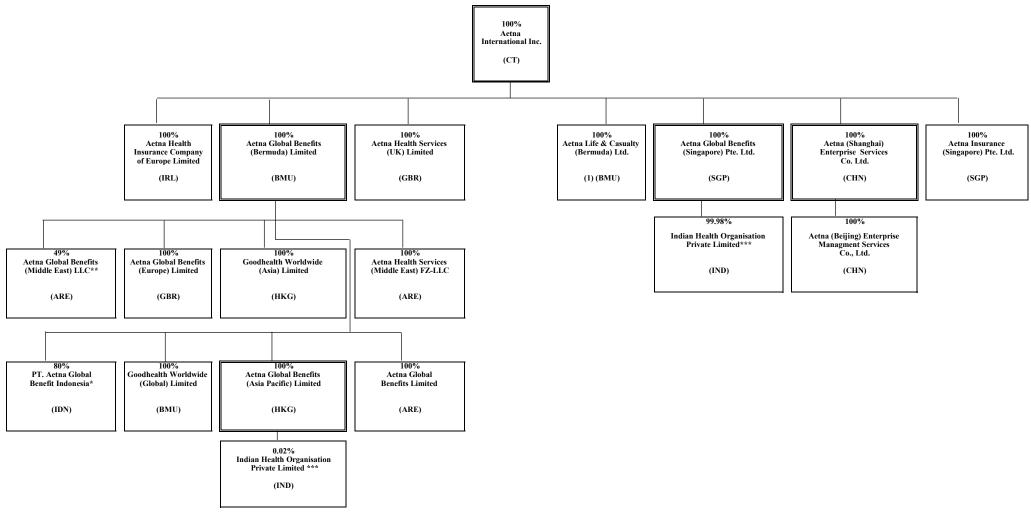
Percentages are rounded to the nearest whole percent and based on ownership of voting rights.

Double borders indicate entity has subsidiaries shown on the same page.

Bold borders indicate entity has subsidiaries shown on a separate page.

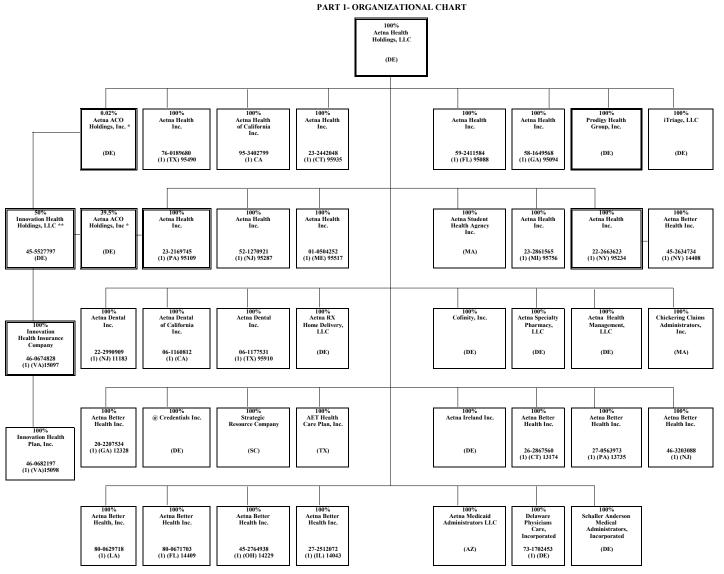
^{*55%} is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

PART 1- ORGANIZATIONAL CHART



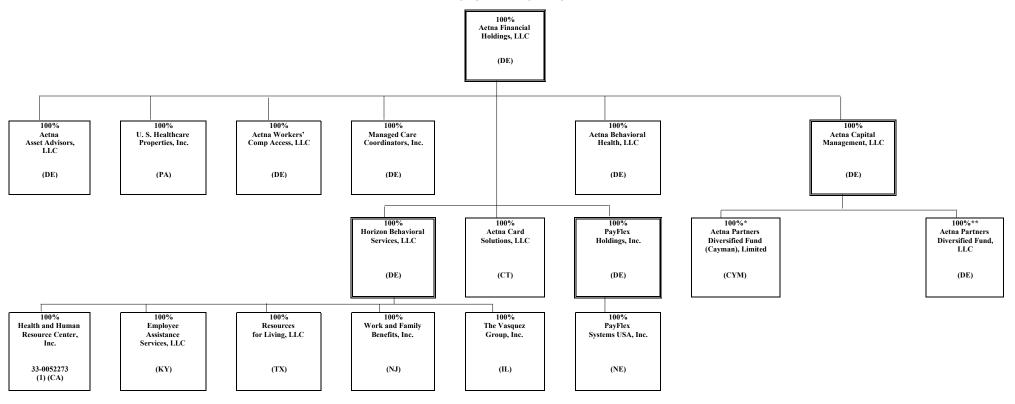
^{* 20%} owned by Suhatsyah Rivai, Aetna's Nominee.

^{** 51%} owned by Euro Gulf LLC, Aetna's Nominee.
*** Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.



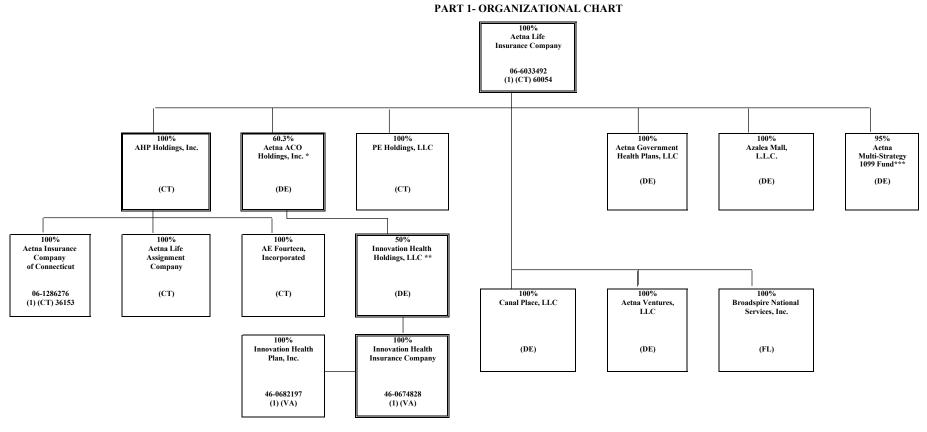
^{*} Actna ACO Holdings, Inc. is owned by Actna Life Insurance Company (60%); Actna Health Inc. (PA) (39%); and Actna Health Holdings, LLC (1%).
** Innovation Health Holdings, LLC is 50% owned by Actna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.

PART 1- ORGANIZATIONAL CHART



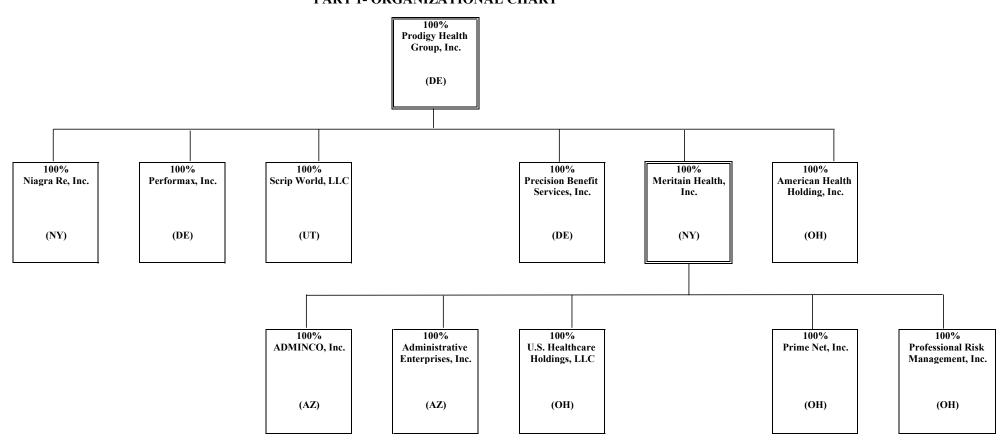
^{*} Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.

^{**} Actna Life Insurance Company and Actna Health and Life Insurance Company own substantially all of the non-managing member interests of Actna Partners Diversified Fund, LLC.

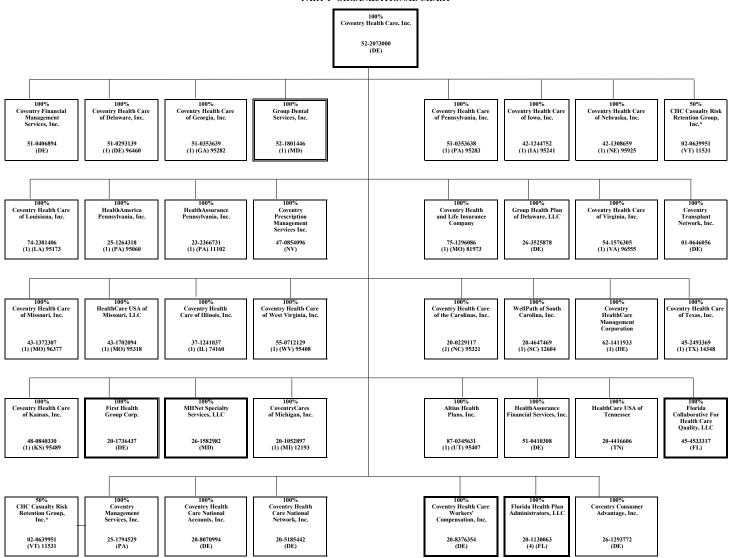


^{*} Actna ACO Holdings, Inc. is owned by Actna Life Insurance Company (60%); Actna Health Inc. (PA) (39%); and Actna Health Holdings, LLC (1%).
** Innovation Health Holdings, LLC is 50% owned by Actna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
***95% is invested and owned by Actna Life Insurance Company and 5% is invested and owned by external accredited investors.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1- ORGANIZATIONAL CHART

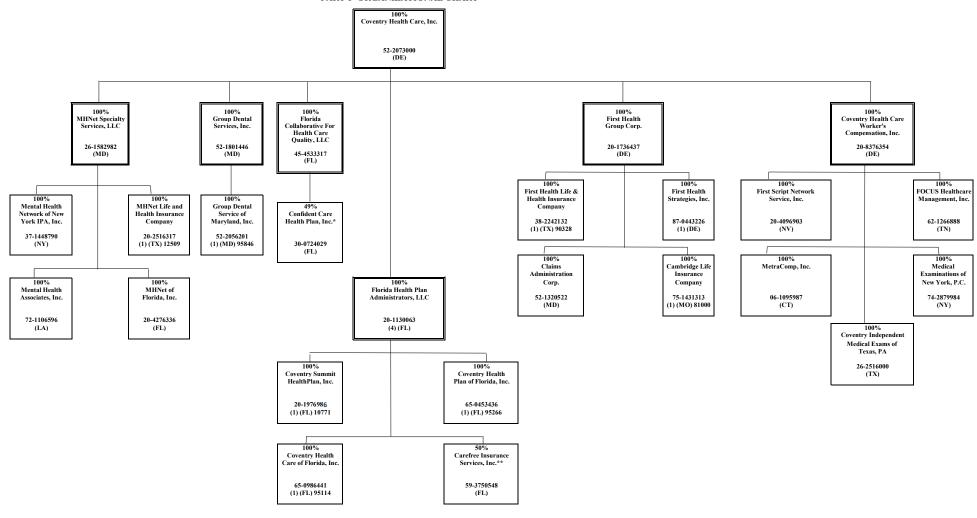


PART 1- ORGANIZATIONAL CHART



^{*} CHC Casualty Risk Retention Group, Inc. is 50% owned by Coventry Management Services, Inc. and 50% owned by Coventry Health Care, Inc.

PART 1- ORGANIZATIONAL CHART



^{*} Confident Care Health Plan, Inc. is 49% owned by Florida Collaborative For Health Care Quality, LLC and 51% owned by Mary Catherine Moffitt, M.D., Inc.

^{**}Carefree Insurance Services, Inc is 50% owned by Florida Health Plan Administrators, LLC, 18% owned by Arthur J. VanNote, 16% owned by Ralph E. Boles and 16% owned by Gloria Montgomery.

16

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to	5	Management,	Ownership	Controlling	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide Percentage	Entity(ies)/ Person(s)	*
00001	AETNA INC	00000	23-2229683	3060706	1122304	,	Aetna Inc.	PA	UIP	(Name of Emily/1 croom)	milderice, Other)	0.0	1 013011(3)	0
00001	AETNA INC.	00000	30-0123754				Aetna Health Holdings, LLC	DE	NIA	Aetna Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	45-4901541				Aetna ACO Holdings, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	4
00001	AETNA INC.	00000	45-5527797				Innovation Health Holdings, LLC	DE	IA	Aetna ACO Holdings, Inc	Ownership		Aetna Inc	
00001	AETNA INC	00000 95935	95-340279923-2442048				Aetna Health of California Inc Aetna Health Inc	CA CT	. IAIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership		Aetna Inc Aetna Inc	0
00001	AETNA INC	95088	59-2411584				Aetna Health Inc.	FL		Aetna Health Holdings, LLC	Ownership		Aetha Inc	
00001	AETNA INC.	95094	58 - 1649568				Aetna Health Inc.	GA.	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc.	0
00001	AETNA INC.	95517	01-0504252				Aetna Health Inc.	ME	I A	Aetna Health Holdings, LLC	Ownership		Aetna Inc.	0
00001	AETNA INC	95756	23 - 286 1565				Aetna Health Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	95287	. 52-1270921				Aetna Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	95234	. 22-2663623				Aetna Health Inc	NY	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0 '
00001	AETNA INC	14408	45-2634734				Aetna Better Health Inc	NY	. A	Aetna Health Inc. (NY)	Ownership		Aetna Inc	0 '
00001	AETNA INC	95109	. 23-2169745 45-4901541				Aetna Health Inc.	PA DE	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc Aetna Inc.	
00001	AETNA INC	95490	76-0189680				Aetna ACO Holdings, Inc Aetna Health Inc.	TX	NIAIA.	Aetna Health Inc. (PA) Aetna Health Holdings, LLC	Ownership		Aetha Inc.	4
00001	AETNA INC.	95040	74-1844335				AET Health Care Plan, Inc.	TX	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc.	
00001	AETNA INC.	12328	20-2207534				Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC.	00000	06-1160812				Aetna Dental of California Inc.	CA	I A	Aetna Health Holdings, LLC	Ownership.	100.0	Aetna Inc	0
00001	AETNA INC	11183	22-2990909				Aetna Dental Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	95910	. 06-1177531				Aetna Dental Inc	TX	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 30-0123760				. Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0 '
00001	AETNA INC	00000	. 13-3670795				Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 22-3187443				Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0 '
00001	AETNA INC.	00000	04-3134551				Chickering Claims	MA	NIA	Astro Health Haldings IIC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	57 - 1209768				Administrators, IncAetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership		Aetha Inc	
00001	AETNA INC.	00000	20-1274723				Cofinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	
00001	AETNA INC.	00000	23-2671370				@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc.	0
00001	AETNA INC.		57 - 0640344				Strategic Resource Company.	SC	NIA.	Aetna Health Holdings, LLC	Ownership.	100.0	Aetna Inc.	0
00001	AETNA INC.	13735	27 - 0563973				Aetna Better Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	13174	26-2867560				Aetna Better Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC.	14043	. 27 - 2512072				Aetna Better Health Inc	L	. A	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0 '
00001	AETNA INC.	00000	. 80 - 0629718				Aetna Better Health, Inc	LA	[A	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0 '
00001	AETNA INC	14409 14229	. 80 - 067 1703				Aetna Better Health Inc	FL	I A	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0 '
00001	AETNA INC	00000	. 25-2764938 46-3203088				Aetna Better Health Inc Aetna Better Health Inc	OH NJ	. A A	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership		Aetna Inc Aetna Inc	
00001	AETNA TNO		. 40-3203000				Aetha Student Health Agency	INJ	IA	Aetha nearth nordings, LLC	. Owner Strip	100.0	ACTIA IIIC	
00001	AETNA INC	00000	04-2708160				Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100 0	Aetna Inc.	0
00001	The state of the s		101 2700100				Delaware Physicians Care,			Notha hoarth horamgo, 220	, o iiii o i o ii i p		notha mo.	
00001	AETNA INC	00000	73-1702453				Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
							Schaller Anderson Medical			3.,				
00001	AETNA INC	00000	. 01-0826783				. Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
		1					Aetna Medicaid Adminstrators			l	l			
00001	AETNA INC	00000	. 86-0842559				LLC.	AZ	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	
00001	AETNA INC	00000	45-2944270				liTriage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC.	00000	16-1471176 20-0438576				Prodigy Health Group, Inc Niagara Re. Inc.	DE NY	NIANIA	Aetna Health Holdings, LLC Prodigy Health Group, Inc	Ownership		Aetna Inc Aetna Inc.	0
00001	AETNA INC.	00000	52-2200070				Performax, Inc	DE	NIA	Prodigy Health Group, Inc	Ownership		Aetna Inc	0 '
UUUU I	METINA TING	00000	. JZ -ZZUUU1 U							irioutyy neattii otoup, IIIC	1 OMING! 2111h		ואסנוום ווול	<u> </u> U

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						Name of					Type of Control			
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
00001	AETNA INC	00000	. 87 - 0632355				Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc	Ownership	100.0	Aetna Inc	0
							Precision Benefit Services,				·			
00001	AETNA INC.	00000	27 - 1760756				Inc.	DE	NIA	Prodigy Health Group, Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC.	00000	31-1368946				American Health Holding, Inc	OH	NIA	Prodigy Health Group, Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 16-1264154		i		Meritain Health, Inc.	NY	.iNIA	Prodigy Health Group, Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC		86-0537707		i		ADMINCO. Inc.	AZ	.iNIA	Meritain Health, Inc	Ownership	100.0	Aetna Inc	0
							Administrative Enterprises,							
00001	AETNA INC	00000	86-0527428				Inc.	AZ	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	16-1684061				U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	34 - 1670299				Prime Net, Inc.	OH	NIA	Meritain Health, Inc.	Ownership.		Aetna Inc.	0
							Professional Risk Management,				- · · · · · · · · · · · · · · · · · · ·			
00001	AETNA INC	00000	34-1348032				Inc.	OH	NIA	Meritain Health. Inc	Ownership	100.0	Aetna Inc	0
00001	71E 1177 1170		01 1010002				Continental Life Insurance			l morritarii riodritii, riio	0 11101 0111 p		710 (110	
00001	AETNA INC.	68500	62-1181209				Company of Brentwood, Tennessee.	TN	IA	Aetna Inc.	Ownership	100.0	Aetna Inc.	0
00001	ALTIVI TIVO		. 02 1101200				Toompany or Brontwood, Tormossoo			Continental Life Insurance	o #1101 5111 p		//otha ///o	
							American Continental Insurance			Company of Brentwood.				
00001	AETNA INC.	12321	20-2901054				Company	TN	I A	Tennessee	Ownership	100 0	Aetna Inc.	
00001	AETNA INC.	60054	06-6033492				Aetna Life Insurance Company	CT	UIP	Aetna Inc.	Ownership		Aetna Inc.	
00001	AETNA INC	000004	45-4901541				Aetna ACO Holdings, Inc	DE	NIA	Aetna Life Insurance Company	Ownership	60.2	Aetna Inc	
00001	AETNA INC	00000	. 06 - 1270755				AHP Holdings, Inc	CT	UDP	Aetna Life Insurance Company	Ownership		Aetna Inc	4
00001	ALINA INC	00000	. 00 - 12/0/33				Aetna Insurance Company of			Aetha Life msurance company	ownersiiip	100.0	ACTIA IIIC	
00001	AETNA INC	36153	. 06-1286276				Connecticut	CT		AHP Holdings, Inc	Ownership	100 0	Aetna Inc.	
	AETNA INC.	00000	. 06 - 1028469				AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc	Ownership		Aetha Inc.	0
00001	AETNA INC.	00000	06-1373153				. AE Fourteen, incorporateu			AND Haldings, INC				0
00001	AETNA INC.	00000	20-3678339				Aetna Life Assignment Company	CT CT	NIA	AHP Holdings, Inc.	Ownership		Aetna Inc Aetna Inc	0
00001	AETNA INC.	00000	06-1423207				PE Holdings, LLCAzalea Mall, L.L.C	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
			. 00 - 1423207				Canal Place, LLC		NIA	Aetna Life Insurance Company	Ownership			0
00001	AETNA INC	00000	20-3180700				Joanal Place, LLC	DE DF	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	. 20-3180700				Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc	0
00004	AETNA INC.	00000	81-0579372				Aetna Government Health Plans,	DE	NIA	Astro Life Incomes Comment	O	100 0	Astas Iss	
00001	AETNA INC	00000	. 81-05/93/2				ILLU	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc	0
00004	AETNIA INIO	00000	FO 0400747				Broadspire National Services,	FL	ALLA	A. t 1 ' f 1	O	400.0	Astas Iss	
00001	AETNA INC	00000	59-2108747				Inc.		NIA	Aetna Life Insurance Company	Ownership		Aetna Inc	0
	AETNA INC.	00000	41-2035961				Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership		Aetna Inc	<u>0</u>
00001	AETNA INC	00000	. 26-2030792				Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	ownersnip	1	Aetna Inc	U
00004	AFTNA INO	1,0000	00 0054500				U.S. Healthcare Properties,	5.4			0 1:	400.0		
00001	AETNA INC	00000	. 23-2354500				. Inc	PA	NIA	Aetna Financial Holdings, LLC.	Ownership		Aetna Inc	
00001	AETNA INC	00000	. 38-3704481				. Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	1	Aetna Inc	0
		1,,,,,			10115		Aetna Partners Diversified	25					l	1
00001	AETNA INC	00000	11-3667142		1314522		Fund, LLC.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	1
		1			,		Aetna Partners Diversified Fund						l	
00001	AETNA INC	00000			1460020		(Cayman), Limited	CYM	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	2
	AETNA INC	00000	. 20-0446676				Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 20-0446713				Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 23-2670015				Managed Care Coordinators, Inc	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
		1					Horizon Behavioral Services,	_						
00001	AETNA INC	00000	. 59-3269144				LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
		1					Employee Assistance Services,			Horizon Behavioral Services,				1
00001	AETNA INC	00000	61-1193498				[LLC	KY	NIA	LLC	Ownership	100.0	Aetna Inc	0

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						Name of					Type of Control			
						Securities					(Ownership,	15 0	1.00	
		NAIG	Fadanal			Exchange if	Name of		Dalatianahin ta		Board,	If Control is	Ultimate	
Group		NAIC Company	Federal ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Controlling Entity(ies)/	
Code	Group Name	Company	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
Code	Group Name	Code	Number	ROOD	OIIX	international)	Health and Human Resource	Location	Littly	Horizon Behavioral Services.	initidence, Other)	rercentage	1 613011(3)	+
00001	AETNA INC.	00000	33-0052273				Center. Inc.	CA_	IA	IIIC	Ownership	100.0	Aetna Inc.	0
00001	//LIN/ INO.						001101; 1110			Horizon Behavioral Services,		100.0	//otha 1110	
00001	AETNA INC.	00000	75-2420973				Resources for Living, LLC	TX	NIA	IIIC	Ownership.	100.0	Aetna Inc.	0
										Horizon Behavioral Services.				
00001	AETNA INC	00000	36-3681261				The Vasquez Group Inc	IL	NIA	LLC	Ownership	100.0	Aetna Inc	0
										Horizon Behavioral Services,				
00001	AETNA INC.	00000	22-3178125				Work and Family Benefits, Inc	NJ	NIA	LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	27 - 1773021				Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC		100.0	Aetna Inc	0
00001	AETNA INC	00000	20-5216478				PayFlex Holdings, Inc	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	91-1774434				PayFlex Systems USA, Inc	NE	NIA	PayFlex Holdings, Inc	Ownership	100.0	Aetna Inc	
							Aetna Health and Life Insurance							
00001	AETNA INC	78700	06 - 0876836				Company	CT	I A	Aetna Inc	Ownership		Aetna Inc	
00001	AETNA INC	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.0	Aetna Inc	0
		0.4.50	57 0005400				Aetna Health Insurance Company					400.0	l	
00001	AETNA INC	84450	. 57 - 0805126				of New York	NY	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00004	AFTNA INO	00000	00 0400070				Aetna Risk Indemnity Company,	DM.		l		400.0	l	
00001	AETNA INC	00000	98-0166872				Limited	BMU	IA	Aetna Inc.	Ownership		Aetna Inc	. 0
00001	AETNA INC	00000	06 - 1571642			-	Aetna International Inc	CT	NIA	Aetna Inc	. Ownership	100.0	Aetna Inc	. 0
00004	AETNA INC.	00000	98-0211470				Aetna Life & Casualty (Bermuda)	BMU	IA	Astas Internetional Inc	O	100 0	Anton Inc	
00001	AETNA INC	00000	98-0211470				LtdAetna Health Services (UK)	BINIU	IA	Aetna International Inc	Ownership	100.0	Aetna Inc	.
00001	AETNA INC.	00000					Limited	GBR	NIA	Aetna International Inc.	Ownership.	100.0	Aetna Inc.	0
00001	AETNA INC	00000	-				Aetna Insurance (Signapore)	GDN	INTA	Aetha iiiternationar iiic	. Ownersinp	100.0	ACTIA IIIC	
00001	AETNA INC.	00000					Pte. Ltd.	SGP	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc.	0
00001	ALINA INO.		-				Aetna Global Benefits (Bermuda)			Actila international inc	. O WITCH STITP		Actila ilic	
00001	AETNA INC	00000					Limited	BMU	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	/ INC.		1				Goodhealth Worldwide (Global)	biiio		Aetna Global Benefits			//otha 1110	
00001	AETNA INC	00000					Limited	BMU	NIA	(Bermuda) Limited	Ownership.	100.0	Aetna Inc.	0
							Aetna Global Benefits (Europe)			Aetna Global Benefits				
00001	AETNA INC.	00000					Limited	BGR	NIA	(Bermuda) Limited	Ownership	100.0	Aetna Inc.	0
							Goodhealth Worldwide (Asia)			Àetna Global Benefits	· ·			
00001	AETNA INC	00000					Limited	HKG	NIA	(Bermuda) Limited	Ownership	100.0	Aetna Inc	0
		1								Aetna Global Benefits				
00001	AETNA INC	00000					Aetna Global Benefits Limited	ARE	NIA	(Bermuda) Limited	Ownership	100.0	Aetna Inc	
l		1					Aetna Health Services (Middle			Aetna Global Benefits			l	1
00001	AETNA INC	00000				-	East) FZ-LLC	ARE	NIA	(Bermuda) Limited	Ownership	100.0	Aetna Inc	0
	LETNI 1110						PT. Aetna Global Benefits			Aetna Global Benefits			l	
00001	AETNA INC.	00000				-	Indonesia	IDN	NIA	(Bermuda) Limited	Ownership	80.0	Aetna Inc	. 5
00004	ASTAN INC	00000					Aetna Global Benefits (Middle	405		Aetna Global Benefits		40.0	l	
00001	AETNA INC	00000					East) LLC	ARE	NIA	(Bermuda) Limited	Ownership	49.0	Aetna Inc	. 6
00004	AETNIA INC	00000					Aetna Global Benefits (Asia	1 11/0	ALL A	Aetna Global Benefits	Owner and his	400 0	Anton Inc.	
00001	AETNA INC	00000	-				Pacific) Limited	HKG	NIA	(Bermuda) Limited	.Ownership	100.0	Aetna Inc	0
00001	AETNA INC.	00000					Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Asia Pacific) Limited	Ownership		Aetna Inc	2
00001	ACTIVA TING		-				Aetna Health Insurance Company	IND	NIA	.raciiid) Limited	ownersitip	0.0	ACTIO IIIC	3
00001	AETNA INC.	00000					of Europe Limited	IRL	NIA	Aetna International Inc.	Ownership	100.0	Aetna Inc.	_
UUUU I	IVETINA TIMO.						101 Faiohe Filliten	INL		Inerna ilireiliar 1011ai 1116	1 041101 2111h		וחסנוום ווול	U

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						Name of					Type of Control			
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
	l	1					Aetna (Shanghai) Enterprise			I				_
00001	AETNA INC	00000					Services Co. Ltd.	CHN	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
	l	1					Aetna (Beijing) Enterprise			Aetna (Shanghai) Enterprise				
00001	AETNA INC	00000					Management Services Co. (China).	CHN	NIA	Services Co. Ltd.	Ownership	100.0	Aetna Inc	00
							Aetna Global Benefits							
00001	AETNA INC	00000					(Singapore) PTE, LTD	SGP	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
							Indian Health Organisation			Aetna Global Benefits				
00001	AETNA INC	00000					Private Limited	IND	NIA	(Singapore) PTE, LTD	Ownership		Aetna Inc	3
00001	AETNA INC	00000	22-2578985				AUSHC Holdings, Inc.	<u>CT</u>	NIA	Aetna Inc.	Ownership		Aetna Inc	0
00001	AETNA INC	00000	06 - 1182176				PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc	Ownership		Aetna Inc	88
00001	AETNA INC	00000	52-2182411				Active Health Management, Inc	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
							Health Data & Management			Active Health Management,				
00001	AETNA INC	00000	23-3009341				Solutions, Inc	DE	NIA	Inc	Ownership	100.0	Aetna Inc	0
							Aetna Integrated Informatics,			Active Health Management,				
00001	AETNA INC	00000	23-2604867				Inc	PA	NIA	Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	27 - 2192415				Health Re, Inc	VT		Aetna Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	51-0029326				ASI Wings, L.L.C	DE	NIA	Aetna Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	06-0918924				Luettgens Limited	CT	NIA	Aetna Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	33-0807547				Medicity Inc	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	27 - 0259978				Novo Innovations, LLC	DE	NIA	Medicity Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	27 - 1170966				Allviant Corporation	DE	NIA	Medicity Inc	Ownership	100.0	Aetna Inc	0
							Innovation Health Insurance			Innovation Health Holdings,				
00001	AETNA INC	15097	46-0674828				Company	VA	I A	LLC	Ownership	100.0	Aetna Inc	0
										Innovation Health Insurance				
00001	AETNA INC	15098	46-0682197				Innovation Health Plan, Inc	VA	IA	Company	Ownership		Aetna Inc	0
00001	AETNA INC	00000					Aetna Multi-Strategy 1099 Fund	DE	NIA	Aetha Life Insurance Company	Ownership		Aetna Inc	9
00001	AETNA INC	00000	52-2073000				Coventry Health Care Inc	DE	I A	Aetna Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health & Life							
00001	AETNA INC	81973	75-1296086				Insurance Co	MO	I A	.Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Financial Mgmt							
00001	AETNA INC	00000	51-0406894				Services, Inc	DE	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health Care of							
00001	AETNA INC	96460	51-0293139				Delaware, Inc	DE	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health Care of							
00001	AETNA INC	95282	51-0353639				Georgia, Inc	GA	I A	Coventry Health Care Inc	Ownership		Aetna Inc	0
00001	AETNA INC	00000	52 - 1801446				Group Dental Services, Inc	MD	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
			1				Coventry Health Care of		1		· ·			
00001	AETNA INC	95283	51-0353638				Pennsylvania, In	PA	I A	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health Care of Iowa,		1		· ·			
00001	AETNA INC	95241	42-1244752				Inc.	IA	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health Care of		1		· ·			
00001	AETNA INC	95925	42-1308659				Nebraska, Inc	NE	I A	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
			1				Coventry Health Care of		1		·			
00001	AETNA INC	95173	74-2381406				Louisiana, Inc	LA	I A	Coventry Health Care Inc	Ownership		Aetna Inc	0
00001	AETNA INC	95060	25 - 1264318				HealthAmerica Pennsylvania Inc.	PA		Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							HealthAssurance Pennsylvania,							
00001	AETNA INC	11102	23-2366731				Inc.	PA		Coventry Health Care Inc.	Ownership	100.0	Aetna Inc	0

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1 i	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15
l						Securities					(Ownership.			
1						Exchange if					Board,	If Control is	Ultimate	
i		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	1
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
00001	AETNA INC.	00000	47 - 0854096				Coventry Prescription Mgmt Srvcs, Inc.	NV	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc.	
00001	AETNA TNC		47 -0004090				Group Health Plan of Delaware,		INTA	Tooventry hearth care inc	ownership	100.0	ACTIA IIIC	·[0]
00001	AETNA INC.	00000	26-3525878				IIIC	DE	NIA	Coventry Health Care Inc.	Ownership	100 0	Aetna Inc.	0
							Coventry Health Care of			,				
00001	AETNA INC	96555	. 54 - 1576305				Virginia, Inc	VA	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Transplant Network,	25				400.0	l	
00001	AETNA INC	00000	01-0646056				IncCoventry Health Care of	DE	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	. 0
00001	AETNA INC.	96377	43-1372307				Missouri. Inc.	MO	I A.	Coventry Health Care Inc.	Ownership_	100.0	Aetna Inc.	
00001	AETNA INC.	95318	43-1702094				HealthCare USA of Missouri. LLC.	MO	IA	Coventry Health Care Inc	Ownership		Aetna Inc	0
]	Coventry Management Services,			,]			
00001	AETNA INC	00000	25-1794529				Inc	PA	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
							Coventry Health Care of West			L				.
00001	AETNA INC	95408	. 55-0712129				Virginia, Inc	WV	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	. 0
00001	AETNA INC.	95321	20-0229117				Coventry Health Care of the Carolinas, Inc.	NC	IA	Coventry Health Care Inc.	Ownership	100.0	Aetna Inc.	
00001	ALTNA INC	95521	. 20-0229117				Wellpath of South Carolina,			Tovelitry hearth care inc	Owner Strip	100.0	Actila IIIC	
00001	AETNA INC	12604	20-4647469				Inc.	SC	I.A.	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC.	000000	62-1411933				Coventry Health Care Mgmt Corp	DE	NIA	Coventry Health Care Inc	Ownership		Aetna Inc	0
i							Coventry Health Care of Texas,				,			
00001	AETNA INC	14348	. 45-2493369				Inc	ТХ	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	
00001	AETNA INC.	95489	48-0840330				Coventry Health Care of Kansas,	KS	I.A.	Coventry Health Care Inc.	Ownership	100.0	Aetna Inc.	
00001	AETNA INC.	00000	20 - 1736437				First Health Group Corp.	DE	NIA	Coventry Health Care Inc.	Ownership		Aetna Inc.	
00001	AETNA INC.	00000	26-1582982				MHNet Specialty Services, LLC	MD	NIA	Coventry Health Care Inc.	Ownership		Aetna Inc.	0
00001	AETNA INC	12193	20 - 1052897				CoventryCares of Michigan, Inc	MI	I A	Coventry Health Care Inc	Ownership		Aetna Inc	0
00001	AETNA INC	95407	. 87 - 0345631				Altius Health Plans, Inc	UT	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
00004	AETNA INO	00000	54 0440000				HealthAssurance Financial	DE				400.0	l	
00001	AETNA INC	00000	. 51-0410308				Services, Inc HealthCare USA of Tennessee,	DE	NIA	.Coventry Health Care Inc	Ownership	100.0	Aetna Inc	. 0
00001	AETNA INC.	00000	20-4416606				LLC	TN	NIA	Coventry Health Care Inc.	Ownership_	100.0	Aetna Inc.	
	ALTIVI IIIO		20 4410000				Coventry Health Care Casualty			1 ooventry hearth eare me	0 WITO TOTT P		notha mo.	1
00001	AETNA INC.	11531	02-0639951				Risk Retention Group, Inc.	VT	I A	Coventry Health Care Inc	Ownership	50.0	Aetna Inc	10
l							Coventry Health Care of				·			1
00001	AETNA INC	74160	. 37 - 1241037				Illinois, Inc	IL	IA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	
00001	AETNA INC.	00000	20-8070994				Coventry Health Care National Accounts. Inc.	DE	NIA	Coventry Health Care Inc.	Ownership	100.0	Aetna Inc.	0
00001	ALTIVA TIVO		20-00/0994			1	Coventry Health Care National	ν⊏	IN I A	Tooventry nearth care inc	ownersurp	100.0	אסנוומ ווונ	⁰
00001	AETNA INC.	00000	20-5185442]	Network, Inc.	DE	NIA	Coventry Health Care Inc.	Ownership_	100.0	Aetna Inc.	0
							Coventry Health Care Workers'			,				
00001	AETNA INC	00000	. 20-8376354				Compensation, Inc	DE	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
00004	AFTNIA INIO	00000	00 4400000				Florida Health Plan	F.	NI A	0	Owner and his	400.0	A.t. I	
00001	AETNA INC	00000	. 20-1130063				Administrators, LLC	FL	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC.	00000	26-1293772				Coventry Consumer Advantage, Inc.	DE	NIA	Coventry Health Care Inc.	Ownership.	100.0	Aetna Inc.	0
00001	ALINA INC		. 20-1230112			1	First Script Network Service,	∪∟		Coventry Health Care Workers'	0 milet 9111h		70 tha 1110	1
00001	AETNA INC.	00000	20-4096903				Inc.	NV	NIA	Compensation, Inc.	Ownership	100.0	Aetna Inc.	0

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
						Name of Securities					Type of Control (Ownership.			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
										Coventry Health Care Workers'				
00001	AETNA INC	00000	. 06 - 1095987				MetraComp, Inc.	CT	NIA	Compensation, Inc.	Ownership	100.0	Aetna Inc	0
	15TH 1110		7, 007000,				Medical Examinations of NY,	***		Coventry Health Care Workers'		400.0		
00001	AETNA INC	00000	74-2879984				IP.C	NY	NIA	Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00004	AETNIA INIO	00000	00 4000000				FOCUS Healthcare Management,	TAL	N11.4	Coventry Health Care Workers'	0 1:	400.0		
00001	AETNA INC	00000	. 62-1266888				. Inc	TN	NIA	Compensation, Inc	Ownership	100.0	Aetna Inc	0
00004	AETNA INC.	00000	00 0540000				Coventry Ind. Medical Exam of TX. PA	TV	NIA	Coventry Health Care Workers'	O	400.0	Aston Inc	0
00001	AETNA INC.	. 00000	. 26-2516000				First Health Life & Health Ins	ТХ	NIA	Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC.	90328	38-2242132				riist neartii Liie & neartii iiis	TX	1.4	First Health Group Corp	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC	00000	87 - 0443226				First Health Strategies, Inc	DE	IANIA	First Health Group Corp	Ownership		Aetna Inc	
00001	AETNA INC	00000	52-1320522				Claims Administration Corp	MD		First Health Group Corp	Ownership		Aetna Inc	
00001	AETNA INC	81000	75-1431313				Cambridge Life Insurance Co	MO	IA	First Health Group Corp	Ownership		Aetna Inc	
00001	ALINA INC	01000	. 70-1401010				Coventry Health Care of			Florida Health Plan	O#1161 3111 p	100.0	Actila IIIC	
00001	AETNA INC.	95114	65-0986441				Florida. Inc.	FI	IΔ	Administrators, LLC	Ownership	100 0	Aetna Inc.	0
00001	ALTIVE INO.	1 00 1 1 4					Coventry Health Plan of			Florida Health Plan	ошногонгр		//otha ///o	
00001	AETNA INC.	95266	65-0453436				Florida. Inc.	FL	IA	Administrators. LLC	Ownership	100_0	Aetna Inc.	0
00001							Coventry Summit Health Plan,			Florida Health Plan	•		7.0 (1.0	
00001	AETNA INC	10771	20-1976986				Inc.	FL	IA	Administrators, LLC	Ownership	100.0	Aetna Inc	0
							Carefree Insurance Services,			Florida Health Plan				
00001	AETNA INC.	. 00000	. 59-3750548				Inc.	FL	NIA	Administrators, LLC	Ownership	50.0	Aetna Inc	12
İ							Group Dental Services of			•	, i			
00001	AETNA INC	95846	52-2056201				Maryland, Inc	MD	IA	Group Dental Services, Inc	Ownership	100.0	Aetna Inc	0
							Mental Health Network of New			•	·			
00001	AETNA INC	. 00000	. 37 - 1448790				York IPA, Inc	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0
							MHNet Life and Health Insurance							
00001	AETNA INC	12509	. 20-2516317				Company	ТХ	I A	MHNet Specialty Services, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	. 00000	. 72-1106596				Mental Health Associates, Inc	LA	NIA	MHNet Specialty Services, LLC	Ownership		Aetna Inc	0
00001	AETNA INC	00000	. 20-4276336				MHNet of Florida, Inc	FL	NIA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0
00004	AFTNA INO		45 4500047				Florida Collaborative Care for	E.				400.0		
00001	AETNA INC	. 00000	45-4533317				Health Care Quality, LLC	FL	NIA	Coventry Health Care Inc	Ownership	100.0	Aetna Inc	0
00004	AFTNA INC	00000	20 0704020				Confident Care Health Plan,	F.		Florida Collaborative Care	O	40.0	Anton Inc	11
00001	AETNA INC	. 00000	30-0724029				Inc	FL	NIA	for Health Care Quality, LLC	ownersnip	49.0	Aetna Inc	11

Asterisk	Explanation
1	Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing membership interests.
	Aetna Life Insurance Company owns the Class C participating shares
3	Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%
	Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 198 shares and Aetna Health Holdings, LLC owns 1 share
	Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Suhatsyah Rivai, Aetna's Nominee.
	Aetna Global Benefits (Bermuda) Limited owns 49% and 51% is owned by Euro Gulf LLC, Aetna's Nominee
	Aetna ACO Holdings Inc. owns 50% and 50% is owned by Innovation Health System Foundation (non-affiliate)
8	55% is owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership
9	95% is invested and owned by Aetna Life Insurance Company and 5% is invested and owned by external accredited investors
	50% owned by Coventry Management Services, Inc. and 50% owned by Coventry Health Care, Inc.
	49% owned by Florida Collaborative For Health Care Quality, LLC and 51% owned by Mary Catherine Moffitt, M.D., Inc.
12	50% owned by Florida Health Plan Administrators, LLC, 18% owned by Arthur J. VanNote, 16% owned by Ralph E. Boles and 16% owned by Gloria Montgomery

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

		INLOI ONOL
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	YES
Expla	nation:	
Bar C	ode:	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A - VERIFICATION

Real Estate 2 Prior Year Ended Year To Date December 31 Book/adjusted carrying value, December 31 of prior year ..
 Cost of acquired: 0 0 2.1 Actual cost at time of acquisition....
 2.2 Additional investment made after acquisition 0 .0 NONE Current year change in encumbrances ...

Total gain (loss) on disposals..... 0 Deduct amounts received on disposals

Total foreign exchange change in book/adjusted carrying value. 0 0 Deduct current year's other than temporary impairment recognized... 0. 8. 9. 0 ..0 0 ..0 0 10. Deduct total nonadmitted amounts. Statement value at end of current period (Line 9 minus Line 10) 0

SCHEDULE B - VERIFICATION

Mortgage Loans				
		1	2	
			Prior Year Ended	
		Year To Date	December 31	
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0	
2.	Cost of acquired:			
	2.1 Actual cost at time of acquisition		0	
İ	2.2 Additional investment made after acquisition		()	
3.	Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals. Deduct amortization of premium and mortgage interest points and commitment fees. Total foreign exchange change in book value/recorded investment excluding accrued interest.		0	
4.	Accrual of discount		0	
5.	Unrealized valuation increase (decrease)		0	
6.	Total gain (loss) on disposals		0	
7.	Deduct amounts received on disposals		0	
8.	Deduct amortization of premium and mortgage interest points and commitment fees		0	
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		0	
10.	Deduct current vear 5 other trial temporary impairment recognized		0	
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-		_	
	8+9-10)		0	
12.	Total valuation allowance		0	
13.	Subtotal (Line 11 plus Line 12)	0	0	
14.	Deduct total nonadmitted amounts	ļ0	0	
15.	Statement value at end of current period (Line 13 minus Line 14)	0	0	

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets					
	1	2			
		Prior Year Ended			
	Year To Date	December 31			
Book/adjusted carrying value, December 31 of prior year	0	0			
2. Cost of acquired:					
2.1 Actual cost at time of acquisition		0			
2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition 3. Capitalized deferred interest and other		0			
3. Capitalized deferred interest and other.		0			
4. Accrual of discount.		0			
5. Unrealized valuation increase (decrease)		0			
6. Total gain (loss) on disposals		0			
6. Total gain (loss) on disposals. 7. Deduct amounts received on disposals. 8. Deduct amortization of premium and depreciation. 9. Total foreign exchange change in book/adjusted carrying value.		0			
Deduct amortization of premium and depreciation		0			
Total foreign exchange change in book/adjusted carrying value		0			
Deduct current year's other than temporary impairment recognized		0			
Deduct current year's other than temporary impairment recognized. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0			
12. Deduct total nonadmitted amounts		0			
13. Statement value at end of current period (Line 11 minus Line 12)	0	0			

SCHEDULE D - VERIFICATION

	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year	18,504,636	23,230,629
Cost of bonds and stocks acquired Accrual of discount	2,756,329	10,094,617
3. Accrual of discount	6,932	3,085
Unrealized valuation increase (decrease)	0	L0
5. Total gain (loss) on disposals	387,570	561,388
Deduct consideration for bonds and stocks disposed of	10,351,239	15,191,293
7. Deduct amortization of premium	73,095	L193,790
8 Total foreign exchange change in book/adjusted carrying value	0	0
Deduct current year's other than temporary impairment recognized		L0
9. Deduct current year's other than temporary impairment recognized. 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	11,231,133	18,504,636
11. Deduct total nonadmitted amounts		<u> </u> 0
12. Statement value at end of current period (Line 10 minus Line 11)	11,231,133	18,504,636

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

During the Current Quarter for all Bonds and Preferred Stock by Rating Class												
	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year				
	Suitent Quarter	ounch quarter	ourient Quarter	ourient gaarter	i iist Quartoi	occord Quarter	Tillia Quarter	THOI Teal				
BONDS												
1. Class 1 (a)	25,611,457	52,477,116	58,910,886	(20 , 445)	25,611,457	19 , 157 , 242	0	25,412,420				
2. Class 2 (a)	509,006	0	0	(1,761)	509,006	507,245	0	510,767				
3. Class 3 (a)	0	0	0	0	0	0	0	0				
4. Class 4 (a)	0	0	0	0	0	0	0	0				
5. Class 5 (a)	0	0	0	0	0	0	0	0				
6. Class 6 (a)	0	0	0	0	0	0	0	0				
7. Total Bonds	26,120,463	52,477,116	58,910,886	(22,206)	26,120,463	19,664,487	0	25,923,187				
PREFERRED STOCK												
8. Class 1	0	0	0	0	0	0	0	0				
9. Class 2	0	0	0	0	0	0	0	0				
10. Class 3	0	0	0	0	0	0	0	0				
11. Class 4	0	0	0	0	0		0	0				
12. Class 5	0	0	0	0	0		0	0				
13. Class 6	0	0	0	0	0	0	0	0				
14. Total Preferred Stock	0	0	0	0	0	0	0	0				
15. Total Bonds & Preferred Stock	26,120,463	52,477,116	58,910,886	(22,206)	26,120,463	19,664,487	0	25,923,187				

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1\$	NAIC 2 \$0	

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
					Paid for Accrued
	Book/Adjusted			Interest Collected	Interest
	Carrying Value	Par Value	Actual Cost	Year To Date	Year To Date
9199999	1.273	xxx	1.273	464	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2 Prior Year
	Year To Date	Ended December 31
Book/adjusted carrying value, December 31 of prior year	0	0
Cost of short-term investments acquired		0
Accrual of discount		0
Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
Deduct consideration received on disposals		0
7. Deduct amortization of premium.	0	0
Total foreign exchange change in book/adjusted carrying value	0	0
Deduct current year's other than temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		0
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,273	0

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E - VERIFICATION (Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	7 ,418 ,552	1,356,287
	Cost of cash equivalents acquired		
1	Accrual of discount		
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals.	0	0
6.	Deduct consideration received on disposals	36,926,552	40 , 441 , 131
	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	8,432,080	7 ,418 ,552
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	8,432,080	7,418,552

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 2 3 4 5 6 7 8 9 9 10 NAIC USP		Show All Long-Term Bonds and Stock Acquired During the Current Quarter											
CUSIP Description Description Pereign Date Acquired Name of Vendor Name of Shares of Stock Cost Par Value Paid for Accorded Interest and Dividends Market Indicator (and set u.S. Special Revenue Fulfill ST HARPICAN EL CHINGTON	1	2	3	4	5	6	7	8	9	10			
CUSIP Description Description Pereign Date Acquired Name of Vendor Name of Shares of Stock Cost Par Value Paid for Accorded Interest and Dividends Market Indicator (and set u.S. Special Revenue Fulfill ST HARPICAN EL CHINGTON										NAIC			
CUSIP Description Description Description Description Description Description Description Description Description Description Description Description Name of Vendor Name of Vendor Shares of Stock Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Market (Identification of Cost Par Value Plat for Accrued Interest and Dividends Par Value Plat for Accrued Interest and Dividends Par Value Plat for Accrued Interest and Dividends Par Value Plat for Accrued Interest and Dividends Par Value Par Value Plat for Accrued Interest and Dividends Par Value Par Value Plat for Accrued Interest and Dividends Par Value Plat for Accrued Interest and Dividends Par Value													
Identification Description Poreign Date Acquired Name of Vendor Shares of Stock Cost Par Value Interest and Divided Indicator In	CUSIP					Number of	Actual		Paid for Accrued	Market			
August Septial Revenue Suppose Full Right Full	Identification	Description	Foreign	Date Acquired	Name of Vendor			Par Value					
FLORIDA'S FLORIDA'S FLORIDA'S FLORIDA'S S.000,000 500,000 0 1FE			. o.o.g	Date / toquil ou	Traine of Voltage	0.10.00 0. 0.00.	0001	. a. va.ac	morest and Direction	in alouto.			
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Government and Their Political Subdivisions 500, 000 500, 000 0 0 0 0 0 0 0 0 0 0 0	3/07/G_DH_/	TELORIDA ST HURRICANE CATASTROP SER A 2		04/10/2013	RARCI AV INVESTMENTS		500,000	500 000	0	1FF			
839999 - Subtotals - Bonds - Part 3	3100000 - Rond	ts - I.I.S. Special Revenue and Special Assessment and	d all Mon-Guarantee	d Obligations of Ag	rencies and Authorities of Government and Their Political Subdivi	eione			0				
839999 - Subtotals - Bonds			all Non-Ouarantee	d Obligations of Ag	encies and Additionales of Government and Their Foliacal Subdivi	510115		,	0				
								,	0				
999999 Totals	8399999 - Subto	otais - Bongs	ı				500,000	500,000	U	λλλ			
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⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

	SCHEDULE D - PART 4																			
					Sho	w All Long-1	erm Bonds	and Stock So	old, Redeeme	d or Otherwis			urrent Quarte							
1	2	3 4	5	6	7	8	9	10		Change in E	ook/Adjusted Ca	arrying Value		16	17	18	19	20	21	22
		F o r							11	12	13 Current Year's	14	15	Book/				Bond		NAIC Desig- nation
CUSIP Identi- fication	Description	e i g Disposal n Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	or Market Indicator (a)
	States, Territories and P		Name of Purchaser	Stock	Consideration	rai value	Actual Cost	value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposai	Disposal	During real	Date	(a)
70914P-AJ-1	PENNSYLVANIA ST GENERAL OBLIGA 5.000%	06/19/2013.	GOLDMAN SACHS & CO		570,490	500,000	550,315	523,814	0	(2,879)	0	(2,879)	0	520,935	0	49,555	49,555	16,181	11/01/2016	1FE
	Bonds - U.S. States, Ten				570,490	500,000	550,315	523,814	0	(2,879)	0	(2,879)	0	520,935	0	49,555	49,555	16,181	ХХХ	XXX
Bonds - U.S	. Political Subdivisions of	States, Territorie	s and Possessions										1	1	1	I				$\overline{}$
138128-HS-5_	GENERAL OBLIGA 5.00	05/24/2013	. FIDELITY CAPITAL MARKETS		566,990	500,000	528,745	514,470	0	(1,353)	0	(1,353)	0	513,116	0	53,874	53,874	16,597	04/01/2020	1FM
216876-HP-0	PUBLIC SC GENERAL O FENTON MI AREA PUBLIC	05/21/2013	. PIPER, JAFFRAY & HOPWOOD		520,505	500,000	536,730	508,309	0	(2,441)	0	(2,441)	0	505,868	0	14,637	14,637	14,097	05/01/2014	1FM
314567-GB-8	SCHS 5.000% 05/0 GRAND LEDGE MI PUBLIC SCH	05/09/2013	MERRILL LYNCH-MUNI		278,993	250,000	270,680	258 , 155	0	(886)	0	(886)	0	257,269	0	21,723	21,723	6,701	05/01/2017	1FM
386028-HB-3	DIST 5.000%	05/20/2013.			542,035	500,000	539,725	513,651	0	(2,233)	0	(2,233)	0	511,418	0	30,617	30,617	14,028	05/01/2015	1FM
			tes, Territories and Possess nt and all Non-Guaranteed		1,908,523 Agencies and A	1,750,000 uthorities of Go	1,875,880 vernments and	1,794,585 Their Political S	ubdivisions	(6,913)	0	(6,913)	0	1,787,671	0	120,851	120,851	51,423	XXX	XXX
	AUBURN UNIV ALABAMA GEN			Sugationic of 7	Ĭ				0	(0.500)	0	(0.500)		FF4 070		7 004	7 204	40.044	00/04/0007	455
050589-HY-9 3128MD-G5-6	FEE REVENUE BOND Freddie Mac POOL NO 2.500% 06/01/27	06/12/2013	CHASE SECURITIES		559,040	500,000	560 , 415	554,269		(2,589)	٥	(2,589)	٥	551,679		7,361	7,361	13,611	06/01/2027	1FE
3128MD-65-6	Freddie Mac POOL NO 2.500% 06/01/27	05/01/2013.			14,893	14,893	15,470	15 . 453		(560)	٥	(560)	0	14.893		(1,213)	(1,213)	4,073	06/01/2027	1
31297P-Z2-0	FED HOME LOAN MTGE CORP GOLD POOL NO 5.	06/01/2013.	1		10,202	10,202	10,324	10,235		(33)		(33)	0	10,202	0	0	0	236	05/01/2035	1
31306Y-R3-7	FREDDIE MAC GOLD POOL CONVENTIONAL 15 YE.	06/01/2013			7,076	7,076	7,387	0	0	(311)	0	(311)	0	7,076	0	.0	0	59	12/01/2027	11
3132GU-H9-8_	FED HOME LOAN MTGE CORP GOLD POOL NO 3	06/01/2013	1		4,441	4,441	4,594	4,587	0	(145)	0	(145)	0	4,441		0	0	53	06/01/2042	11
3132HL-F4-0	FED HOME LOAN MTGE CORP GOLD POOL NO 3	06/01/2013	Paydown		9,025	9,025	9,521	9,497	0	(472)	0	(472)	0	9,025	0	0	0	132	08/01/2042	11
3135G0-SB-0_	FED NATL MTGE ASSN 0.375% 12/21/15	05/28/2013.	Strategas Securities, LLC		499,467	500,000	499,460	0	0	69	0	69	0	499,529	0	(62)	(62)	823	12/21/2015	11
31407H-3F-1_	FED NATL MTGE ASSN POOL NO 6.000% 07/0 FED NATL MTGE ASSN POOL	06/01/2013	Paydown		5,798	5,798	5,715	5,729	0	69	0	69	0	5,798	0	0	0	143	07/01/2036	11
31407T-JK-7	NO 6.000% 10/0 MICHIGAN MUN BD AUTH REV	06/01/2013	Paydown		11,982	11,982	12,072	12,013	0	(31)	0	(31)	0	11,982	0	0	0	274	10/01/2035	11
59455T-Q6-2_	REVENUE BONDS	05/09/2013	Wachovia		218,007	205,000	209,292	0	0	(469)	0	(469)	0	208,823	0	9,184	9,184	6,349	10/01/2015	1Z
59455T-T6-9_	REVENUE BONDS		WARBURG DILLON READ		47,564	45,000	45,942	0	0	(62)	0	(62)	0	45,881	0	1,683	1,683	1,394	10/01/2015	1FM
594695-K4-9	REVENUE BONDSMICHIGAN ST TRUNK LINE	05/22/2013	MERRILL LYNCH-MUNI		572,265	500,000	547 ,925	522,662	0	(2,274)	0	(2,274)	0	520,388	0	51,877	51,877	14,375	11/01/2016	1FM
594700-BH-8	FUND REVENUE BOND	05/09/2013	. Wachovia		318,003	250,000	287 , 360	273,419	0	(948)	0	(948)	0	272,472	0	45,531	45,531	7,372	11/01/2020	1FM
606915-L5-3	IMPT UNREFUNDED BA MUNI ENERGY AGY OF	05/13/2013	MORGAN STANLEY		197 , 404	195,000	200,238	195,000	0	4,263	0	4,263	0	199,263	0	(1,859)	(1,859)	8,531	07/01/2023	1FM
625914-HH-2	NEBRASKA REVENUE BOND NORTH TEXAS TWY AUTH REV	06/07/2013	. CITIGROUP		280,400	250,000	289,358	286,409	0	(1,536)	0	(1,536)	0	284,873	0	(4,473)	(4,473)	8,715	04/01/2028	1FE
66285W-JG-2	REVENUE BONDS. UNIV OF MINNESOTA MN	06/17/2013	. GUGGENHEIM CAPITAL MARKET		574 , 165	500,000	563,675	557 , 352	0	(2,670)	0	(2,670)	0	554,682	0	19,483	19,483	21,000	09/01/2026	1FE
914468-BC-6	REVENUE BONDS 5.0 WEST VIRGINIA ST ECON DEV	05/29/2013	. PIPER, JAFFRAY & HOPWOOD		563,070	500,000	546,780	533,943	0	(3,756)	0	(3,756)	0	530 , 188	0	32,882	32,882	20,764	08/01/2023	1FM
95648M-MR-7 3199999 -	AUTH REVENUE B		MERRILL LYNCH-MUNI	 Guaranteed	275,563	230,000	270,754	268,317	0	(1,419)	0	(1,419)	0	266,898	0	8,665	8,665	5,494	06/01/2022	1FM
1,00000	Obligations of Agencies and Authorities of Governments and Their Political Subdivisions 4,565,580 4,128,262 4,491,233 3,653,396 0 (12,896) 0 (12,896) 0 4,402,581 0 162,999 162,999 114,338 XXX XXX XXX																			
Bonds - Ind	ustrial and Miscellaneous	(Unaffiliated)			7,000,000	4,120,202	4,401,200	0,000,000		(12,090)	0	(12,090)	· · · · ·	4,402,301		102,333	102,333	114,000		
373334-JY-8	GEORGIA PR SR UNSECURED 0.750% 08/10/1	05/09/2013	KEYBANC CAPITAL		502,500	500,000	499,763	499,793	0	28	0	28	0	499,821	0	2,679	2,679	2,854	08/10/2015	1FM
46625H-JF-8	JP MORGAN CHASE & CO SR UNSECURED 1.17 STATOIL ASA SR UNSECURED	06/06/2013	MORGAN STANLEY		502,780	500,000	500,000	0	0	0	0	0	0	500,000	0	2,780	2,780	2,269	01/25/2018	1FE
85771P-AH-5	1.200% 01/17/	_F05/15/2013_	WACHOVIA		175,039	175,000	174,799	174,803	0	14	0	14	0	174,817	0	221	221	1,044	01/17/2018	1FE

Show All Long-Term Bonds and Stock Sold. Redeemed or Otherwise Disposed of During the Current Quarter

	Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter																				
1	2	3	4	5	6	7	8	9	9 10 Change in Book/Adjusted Carrying Value 16 17 18 19 20							21	22				
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		r										Current Year's			Book/				Bond		nation
OLIGIB		e			l				Prior Year	Unrealized		Other Than		Total Foreign	Adjusted	Foreign			Interest/Stock	Stated	or
CUSIP Identi-			Disposal		Number of Shares of				Book/Adjusted Carrying	Valuation Increase/	Current Year's (Amortization)/		Total Change in B./A.C.V.	Exchange Change in	Carrying Value	(Loss) on	Realized Gain (Loss) on	Total Gain (Loss) on	Dividends Received	Contractual Maturity	Market Indicator
fication	Description	l y	Disposal	Name of Purchaser		Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
	WESTPAC BANKING CORP SR	1"1			Otoon					(200.0000)	7.00.00.01	rtocogriizou		5		Вюрова		· ·			1 ` ′
	UNSECURED 2.00.	F	05/24/2013			514,710	500,000	499,645	499,671	0	22	0	22	0	499,693	0	15,017	15,017			1FE
	- Bonds - Industrial and I		llaneous (Un	affiliated)		1,695,029	1,675,000	1,674,207	1,174,267	0	64				1,674,331	0		20,697		XXX	XXX
8399997	- Subtotals - Bonds - Par	t 4				8,739,622	8,053,262	8,591,635	7,146,062	0	(22,624)	0	(22,027)		8,385,518	0	****	354,102 354,102		XXX	XXX
8399999	- Subtotals - Bonds	1 1				8,739,622	8,053,262	8,591,635	7,146,062	1	(22,624)	1	(22,624)	1 0	8,385,518	0	354,102	354,102	196,053	XXX	1 1
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9999999	Totals					8,739,622	XXX	8,591,635	7,146,062	0	(22,624)	0	(22,624)	0	8,385,518	0	354,102	354,102	196,053	XXX	XXX

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH Month End Depository Balances

1	Month End Depository Balances											
Code Page	1				5	Book E	Balance at End of	Each	9			
Company Comp	Donository	Codo	of	Interest Received During Current	Interest Accrued at Current Statement	6	7	8	*			
2009-9986 2009	Open Depositories	Code	IIIICICSI	Quarter	Date	T II St. IVIOITIII	Second Month	THIIG WOHLI				
Office Section Office Office		I	I			26,690,886	26,690,993	26,690,993	XXX			
2650960 Part Coeth on Dynos 1	0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	XXX			(1,910,502)	(8,530,577)					
0499999 Cash in Company's Office XXX XXX XXX XXX XXX XXX XXX XXX XXX X	0199999 Total Open Depositories	XXX	XXX	0	0	24,780,384	18,160,416	18,416,553	XXX			
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0499999 Cash in Company's Office XXX XXX XXX XXX XXX XXX XXX XXX XXX X	0399999 Total Cash on Deposit	XXX	ХХХ	0	0	24.780.384	18.160.416	18,416.553	XXX			
0599999 Total XXX XXX 0 0 0 24,780,384 18,160,416 18,416,553 XX	0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX			
	0599999 Total	XXX	XXX	0	0	24,780,384	18,160,416	18,416,553	XXX			

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Chau	Investments	Owned	End of	Current	Ougston
Snow	investments	Ownea	Ena or	Current	Guarter

1 2 3 4 5 6 7 8											
1	2	1 -	4			, , , , , , , , , , , , , , , , , , , ,					
		Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received				
Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year				
Industrial and Miscellaneous - Issuer Obligations											
CONSOLIDATED EDISON INC CP 4(2) 144A.		06/27/2013	0.300	07/01/2013		0	19				
DCP MIDSTREAM LLC CP 4(2) 144A		06/19/2013	0.360	07/19/2013		0	70				
EASTMAN CHEMICAL CORP. CP 4-2		06/25/2013	0.320	07/17/2013		0	73				
CONSOLIDATED EDISON INC CP 4(2) 144A. DCP MIDSTREAM LLC CP 4(2) 144A. EASTMAN CHEMICAL CORP. CP 4-2. HEWLETT-PACKARD CO CP 4(2) 144A. PPL ENERGY SUPPLY LLC CP 4(2). PALL CORP. CP.		06/24/2013	0.330	07/08/2013		0	88				
PPL ENERGY SUPPLY LLC CP 4(2)		06/17/2013	0.280	07/02/2013	1,359,989	0	148				
PALL CORP CP.		06/28/2013	0.310	07/31/2013	1,137,706	0	29				
WILLIAMS PARTNERS LP CP 4(2) 144A. NOBLE CORP CP 4(2) 144A.		06/25/2013	0.400	07/08/2013		0	46				
NOBLE CORP CP 4(2) 144A.		06/11/2013	0.310	07/16/2013	1,363,824	0	235				
3299999 - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					8,432,079	0	708				
3899999 - Subtotals - Industrial and Miscellaneous (Unaffiliated)					8,432,079	0	708				
7799999 - Subtotals - Issuer Obligations					8,432,079	0	708				
8399999 - Subtotals - Bonds					8,432,079	0	708				
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8699999 Total Cash Equivalents					8,432,079	0	708				



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2013 OF THE CoventryCares of Michigan, Inc. MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

	Individual (Coverage	Group C	overage	5
	1	2	3	4	Total
	Insured	Uninsured	Insured	Uninsured	Cash
Premiums Collected		ХХХ		ХХХ	0
2. Earned Premiums		XXX		XXX	XXX
3. Claims Paid		ХХХ		ХХХ	0
4. Claims Incurred		ХХХ		ХХХ	XXX
Reinsurance Coverage and Low Income Cost Sharing – Claims Paid Net of Reimbursements Applied (a)	XXX		XXX		0
Aggregate Policy Reserves - Change		XXX		XXX	XXX
7. Expenses Paid		ХХХ		ХХХ	0
Expenses Incurred		ХХХ		ХХХ	XXX
9. Underwriting Gain or Loss	0	XXX	0	XXX	XXX
10. Cash Flow Result	XXX	XXX	XXX	XXX	0